

After Action Review of Emergency Response in Ethiopia 2015-2018 & Kenya 2017-2018



Addis Ababa,
21-23 February
2018



analytical
appreciative curious
hardworker persistent
chronological humorous
timekeeper problem-solver
humanitarian positive-disruptor helpful
positive sensitive synergy-creator
good-listener
thought-provoker
committed thinker calm impartial
creative reflective
detailed attentive
team-player
outgoing



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ChildFund International EMU, ESA Regional Office, and Ethiopia & Kenya Country Offices

Executive Summary: AAR on Emergency in Ethiopia & Kenya 2018

The After Action Review Workshop was held in Addis, Ethiopia from Feb 21-23, 2018 with participants from: ChildFund offices in Kenya, Ethiopia, the International Office (IO), the Africa Regional Office (RO), and Korea. The objectives for the workshop were to: a) Examine what did and did not work well in this emergency response; b) clarify on the added value of ChildFund in the multi-agency emergency response; c) identify ways to improve ChildFund's emergency response efforts and prepare for future emergencies; and d) compare lessons from this ER with previous ERs to make recommendations for ChildFund's global planning.

Disaster timeline-events and response - Participants from the two country teams built timelines for critical Events, Challenges, and Responses that occurred during their ER, with inputs from RO, IO and Korea colleagues. This generated a good understanding about shared issues for both countries, more depth about the emergencies in each country, and celebrated ChildFund's contributions. The time lines served as a contextual backdrop for all the other discussions during the course of the workshop.

Plans vs reality - Participants discussed adaptive planning strategies as the emergency evolved, plus evidence of outcomes and opportunity costs. Key points raised included:

Ethiopia team – Planning: need for functional EPP and validation of incoming data about numbers and areas affected; need for good preparation for ER, including design of ER-specific protocols and training staff ahead of time on CPiE and child safeguarding policy. Outcomes: value of rapid action by national emergency response team (NERT); need to adapt HR and logistics protocols for ERs to ensure effectiveness and efficiency. Opportunity costs: need to develop comprehensive and flexible HR strategy for emergencies.

Kenya team – Planning: value of having an ER coordinator to streamline ER processes; and being able to adapt ER procurement policy from Ethiopia (cross country learning). Outcomes: successful fundraising achieved by a dedicated proposal development team at the CO.

Appreciation – for the 'successes' of the ER in Ethiopia and Kenya - This was an appreciative inquiry into what we had done well in the ERs for Ethiopia and Kenya. Each CO briefly presented their pre-workshop stakeholder assessments; both teams were praised by the stakeholders for their feeding programs. After this, the working sessions raised the following key points:

Ethiopia team - Worked well: timely execution due to commitment and coordination, policy revision and systems strengthening; child protection and timely response that saved lives and livestock/ livelihoods through support for water points; ER benefited from strong leadership and focusing on operational areas where ChildFund had good partnerships that could be mobilized quickly. Innovations: engagement of elders and system of child friendly spaces; defluoridation of water supplies for health safety.

Kenya team – Worked well: proposal development team that rapidly wrote multiple successful ER proposals and constant monitoring of the emergency through effective partners in the field; these efforts contributed to increased numbers of children attending ECDs in the affected areas.

The second phase of discussion reflected on which issues showed key qualities of ChildFund's successful contributions to the response. The key points that were shared were:

Ethiopia team – resource mobilization used own resources flexibly, and built donor confidence, though this was waning by the end of a three-year chronic emergency; partnership development was complementary and diversified, but was sometimes insufficient and needed direct implementation by the CO team; timely response was guided by a participatory rapid assessment, though some delays happened due to insecurity and challenges with doing infrastructure like drilling boreholes; policy review helped guide the process and generated a guidance document for future use; financial tracking and internal control system software was useful and effective; child friendly space approach engaged well with children, used minimal resources, and had positive educational outcomes.

Kenya team – ER strategy was developed within three weeks of the emergency being declared, and provided an effective guide on what to do and where; mainstreaming CP during training of ER teams and food distribution; and linking ER response to ECDs was effective, addressed a gap in the national ER and allowed the ER to reach more children than originally targeted.

Lesson learned II – what did not work well in the ER - This session acknowledged that problems happen, mistakes get made and we need to learn from what had not gone well in the ER responses. The stakeholder assessment in Ethiopia heard that the ER could not reach all the targeted recipients due to scarcity of resources and high demand; services were delayed by slow procurement process, market inflation, government delay in signing project agreement and political instability. In Kenya, stakeholders said the ER was troubled by delays in service provision; additionally, expectations from government and beneficiaries were huge (food, services, restocking, whole communities, etc.) compared to the program focus on ECD children and caregivers. In the following small group discussions, participants were candid in sharing key points about what did not work well:

Kenya team – procurement delays due to lack of suppliers prequalified for ER logistics and price fluctuations; partnerships not fully effective, as there was only one LP in the affected area, and they became overwhelmed, requiring CO support; the focus on ECD omitted older children.

Ethiopia team – lack of reliable data caused delays and challenges to resource mobilization; there were coordination gaps in the absence of an ER system that caused tension and frustration; procurement delays due to procedural gaps led to cost extension and damaged image, leading to requests for no-cost extensions; high staff turnover due to resource constraints affecting compensation, which led to gaps in project implementation; delays in signing project agreements, due to long approval processes and lengthy appraisals by government; delays in construction projects due to quality gaps and complaints, leading to unintended expenses and affecting the targeted communities.

RO/IO team – gaps in the RO and IO level ER response due to lack of clarity in or understanding of relevant protocols; communication gaps, particularly between units in the IO, leading to delays in fundraising efforts and unnecessary grant extension requests.

In the next part of the session, participants reflected on extracting lessons from selected failures and proposing recommendations.

Kenya team – key lesson: COs need access to suppliers that are prequalified for ER support; recommendation: establish separate database of suppliers pre-qualified for ER.

Ethiopia team – key lesson: Implementing stand-alone ER adversely affected sustainability of ER Projects; recommendation: Integrate ER with other development programs and reduce or avoid stand-alone ER projects; key lesson: unattractive staff benefits packages must be revisited to prevent excess turnover of ER staff; recommendation: HR for ER to review compensation and ER rosters, looking for innovative ways of retaining ER staff.

RO/IO team – key lesson: Chain of communication not working internally in ChildFund; recommendation: internal cross-departmental meeting in IO post-AAR to review and suggest specific actions, also experiment with enhanced virtual communication.

Developing and prioritizing recommendations - In this session, participants reflected on specific themes to prioritize recommendations. Following are key recommendations from the discussions:

Leadership – CD to ensure effective, efficient and up-to-date ER policies and procedures are in place and aligned with the country context, including support for an informed and functional NERT. Organizational structure - CO program unit to be accountable to ensure integration of CP, DRR aspects at the proposal development stage. Resource mobilization & maintenance - CO to establish and regularly update pre-approved vendor data base (based on criteria, EMU Guideline and in-country experience), and build strategic partnerships with organizations of experts capitalize on their contractors and/or partners. Accountability - When an ER is declared, the affected CO could participate in regular online meetings open to all levels for

updates on status, challenges and needs; meetings could be organized by EMU. Also, build on system of KM for ER already active in Ethiopia; agree with EMU on location of the system and how it is shared.

Sustainability - COs build on already existing practices and community established structures to improve project design and incorporate the “build back better” concept; this links with resilience, which should be promoted on all levels and in all communities. Advocacy - CO to ensure budget for advocacy is included in ER strategy from the start to influence policies and change around ER.

3.1 Long-range thinking - Participants split into four working groups to look at lessons and recommendations for selected long range planning issues for ERs. Here are the key results:

EPPs and pre-positioning - EPPs for vulnerable countries are critical to ensure programmatic focus and pre-positioning; Action: Completed EPPs should be “Good enough”, and not necessarily perfect or ‘finalized’; EPP development process should be inclusive and participatory. Partnership and coordinating bodies - Having strong local partners helps us reach communities faster and collect situational information promptly. Networking and strategic engagement in clusters facilitates access to national and regional information, and positions us for early response decisions; Action: COs to strengthen knowledge and capacity of LPs in ER. COs and RO need to be strategic in engagement with networks and coordination bodies. Horn of Africa (HoA) regional outlook and policy advocacy – ChildFund has a significant presence in the HoA and fundraising credibility, though missing visibility; regarding advocacy, ChildFund lacks dedicated budget and there has been limited ER experience sharing within and beyond the organization; Action: ER strategy at CO level should always include budget for advocacy purpose, and coordinated links between levels are needed for effective advocacy. Building resilience, DRR and transition to recovery - DRR has not been sufficiently prioritized during planning, due to historical dependence of LPs on subsidy and their limited interest or capacity for DRR; and inconsistencies in transiting from emergency to recovery - timing, reporting, level of engagement & budget; Actions: include critical livelihood issues in EPP and ER strategy, protocol/checklist and early warning systems; CO to include recovery transition plan in ER strategy and budget at onset of ER.

Action plans - Action plans were formulated by the CO teams and the team of participants visiting from RO, IO (F&E), Alliance, and IO (EMU). These action plans built on the lessons and recommendations that had been emerging over the course of the workshop. Full details are included in the synthesis report.

Closing remarks - All participants gathered in a circle, holding hands, for sharing brief comments to the rest of the group before the meeting officially closed. The most common comments around the group were that this was a real learning experience; the learning and wisdom came from each other; the workshop has changed how we look at failures – we now see them as more of an opportunity for learning; and the timeline is a powerful tool for reflection.



ChildFund International – After Action Review for Emergency in Ethiopia & Kenya, 2018

Venue: Saro-Maria Hotel, Addis Ababa, Ethiopia

21-23 February 2018

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Introduction:

The After Action Review Workshop was held in Addis, Ethiopia from **Feb 21-23, 2018**. The participants who attended were from: **ChildFund International: Headquarter or International Office (IO), Regional Office (RO), ChildFund Korea, ChildFund Kenya and ChildFund Ethiopia**. [see participant list and agenda in Annexes]

Objectives for the workshop:

1. Build understanding among staff and key stakeholders of what worked well and what did not work well in this emergency response [Ethiopia and Kenya]
2. Clarify key aspects of added value that ChildFund brought to the multi-agency emergency response in Ethiopia and Kenya; including the voice of stakeholders not at the workshop
3. Identify actions that ChildFund will need for making improvements in emergency response efforts and prepare effectively for any future emergency response efforts and/or strategy
4. Compare lessons from ChildFund’s emergency response in Ethiopia and Kenya with lessons from previous ChildFund emergency responses and make recommendations for ChildFund’s global emergency strategy/strategic planning.

Desired outputs / deliverables by participants:

1. Consensus on key lessons from this emergency response
2. Prioritization and commitment on key recommendations upon which Senior Management Teams at Country Offices (COs), RO, and IO will hold themselves accountable
3. List of Follow-up Action Steps, with identified responsibilities at IO, RO, and CO levels

4. One Set of Key Messages from the Meeting, Incorporating IO/RO/CO Perspectives for Sharing with all CO Staff & Partners.

Key concepts for the After Action Review

Definitions for several key concepts were presented and then reviewed by the participants to ensure a common understanding and usage during the workshop. The definitions were posted and were regularly referred to by the participants during small group work and plenary discussions.

Lesson learned:

A lesson is knowledge or understanding gained by experience. It may be a positive or negative experience. It must be significant in having a real or assumed impact on operations, valid by being factual and technically correct and applicable by identifying a specific design, process or decision that reduces or eliminates the potential for failures and mishaps or reinforces a positive result.

Good recommendation:

A good recommendation should identify a specific actor (responsible), an action, a performance target, and a means of verification.

1. Major discussion sessions of day 1

1.1 Disaster timeline-events and response

Participants from the two country teams identified critical Events (Positive, Negative), Challenges (External and Internal), and Responses (Interventions, Decisions and Actions) that had taken place over the duration of their emergency response. These occurrences were posted on timelines by month for the entire emergency period in each of the two countries (Ethiopia – three years; Kenya – one year). The small group discussions to generate the timelines and the plenary review of these timelines were strongly appreciated by the participants. The exercise allowed the participants to understand much more about shared issues for both countries, more depth about the differences and complexities of the emergencies in each country, and to visibly and powerfully celebrate the enormous efforts and contributions of each country response. The posted time lines served as a contextual backdrop for all the other discussions during the course of the workshop. The full timelines from both countries are included in the annex section of this summary report.



"It was encouraging to find out that ChildFund Kenya and Ethiopia made huge outcomes like saving lives and protecting children while facing some challenges like staffing and procurement." [Wonki - Alliance partner-Korea]

"I was impressed and amazed, especially with this group without formalized EPPs [emergency preparedness plans] that were up to date; they seemed quicker, effective, efficient and less stress on CO." [Brenda -IO- USA]

"I learned a great deal, but the timeline is my highlight & the first thing I will tell others about." [from final evaluation]

1.2 Plans vs reality

Working in small groups by country, the participants discussed their planning processes before and during the ER, their coping/adaptive planning strategies as the emergency evolved, plus evidence of outcomes and opportunity costs. More specifically, within the operations, participants considered procurement, logistics, finance, budget, Grants Acquisition and Management (GAM), security, safety, burnout, and communications. Similarly, within program, participants considered design, quality, Monitoring and Evaluation (M&E), Knowledge Management (KM), beneficiary feedback, external communications, accountability, coordination, and partnering/ partnership.

Results by team

Ethiopia program team

Key points	Discussions points	Lessons
Planning	<p>Leading issues</p> <ul style="list-style-type: none"> • Had no EPP; needed to rapidly develop ER strategy • Developed ER structure & procedures; later revised strategy • Had to use gov't data, but it needed validation; conducted rapid assessment 	<ul style="list-style-type: none"> • Develop & Update EPP- By CO Director • Confirm government data/Information; Need clarity of numbers being affected • Better clarity on ER management by Emergency Management Unit (When, What, How, Where, etc) by the end of FY
Outcome	<p>Outcomes</p> <ul style="list-style-type: none"> • Saved lives of vulnerable groups through Community Based Management of Acute Malnutrition (CMAM) • Improved health status of affected people, groups • Recognized by gov't as key player in Child Protection in Emergencies (CPiE) • Maintained school attendance • Improved strategic partnership with donor • Improved survival of cattle, livelihoods 	<ul style="list-style-type: none"> • To approve immediate response at onset by CO National Emergency Response Team (NERT) • Collaboration with relevant gov't units & other Stakeholders • Allocate reserve Fund / Contingency in FY19 budget • Emergency Response (ER) team to re-design integrated response project • Interventions to be improved continuously
Opportunity costs	<p>Opportunity costs</p> <ul style="list-style-type: none"> • Unrestricted Fund depleted due to focus on ER • Reduced staff time for development program • Downsized long term program interventions • Less focus given to sponsorship program areas • Staff's work-life balance suffered 	<ul style="list-style-type: none"> • Flexible budget needed by Fundraising and Engagement division (F&E) at beginning of FY • Engage volunteers & beef up staff at start of ER • Complete preparedness plan • Develop Emergency staff roster - CO & Global Human Resources (GHR) • Get staff on Temporary Duty (TDYs) from other COs

Ethiopia operations team

Key points	Discussions points	Lessons
Planning	<ul style="list-style-type: none"> • We were not ready for ER • HR policy for ER not in place • Normal procedure used/ applied for ER as regular development program, e.g., Approval process followed that of development projects • Fundraising coordination (was negative) 	<ul style="list-style-type: none"> • Design of protocols tailored to Emergency • Training staff before ER on CPiE • Situation Reports (SitReps) were useful • Adherence to Child safeguarding policy (CSG) is critical • Need competent supporting staff • Need sustained staff commitment
Outcomes	<ul style="list-style-type: none"> • Job descriptions needed revision for ER • Procurement policy implementation in ER • Benefit & implementation in ER • Contract management 	<ul style="list-style-type: none"> • Performance Planning and Evaluation (PPE) for staff revised to the context of ER • Task force for items distribution & coordination • Emergency recruitment protocol developed & now in place

Kenya team (program & operations combined)

Key points	Discussions points	Lessons
Planning	<p>Leading issues</p> <ul style="list-style-type: none"> Capacity: had strong documentation lessons in 2011 & used in 2017; CO had existing staff capacity based on 2011 Experience (Informed what gaps to recruit for) LP staff-stressed with ER (Turkana) Needed to develop/constitute a dedicated proposal dev. Team for ER fund raising The need for ER position at CO -Negative Not having ER procurement procedure (Negative) 	<ul style="list-style-type: none"> Response informed more by previous 2011 response than the EPP (it has never been finalized) Having ER coordinator helped speed up/Streamline response Did not have a Procurement policy for use in ER. Adapted (Positive) procurement plan of Ethiopia's version to guide response
Outcome	<ul style="list-style-type: none"> Increased enrolment & retention of children in early childhood development (ECD) centers Improved health of children; saw reduced visits & referral to hospital Communicate plan Implementation plans included Monitoring/tracking tools Response formats Donor targets 	<ul style="list-style-type: none"> Successful fundraising – from having a dedicated fundraising team at Country Office Activation of NERT was critical Available tools by end of ER are foundation for future response
Opportunity costs	<ul style="list-style-type: none"> LP Staff time- Shift to supporting ER from normal programs Funds - redirected 25% of budget for LPs from program plans to ER 	<ul style="list-style-type: none">

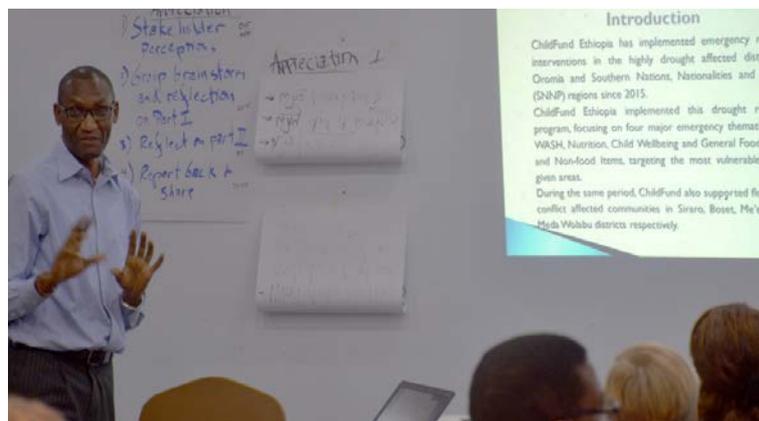
1.3 Appreciation – for the ‘successes’ of the ER in Ethiopia and Kenya

This session used an appreciative inquiry approach to identify what we had done well in the ERs for Ethiopia and Kenya. The session began with brief presentations from each CO based on their pre-workshop assessments of stakeholder perceptions about ChildFund’s performance in the ER.

Kenya’s stakeholder assessment - what had gone well with the ER:

Responses by key stakeholder groups **Government (Gov’t) representatives** – had seen more children enrolled in school as a result of ECD feeding program; as well as food distributed plus diet of children and pregnant/ lactating women improved

Beneficiaries – were pleased with rapid response; and how quality food was distributed for children and pregnant/ lactating women.



Ethiopia’s stakeholder assessment - what had gone well with the ER:

Stakeholders appreciated lifesaving via relief food and nutrition, as well as water rehabilitation. No deaths attributable to the emergency were recorded in program areas; and school absenteeism and dropout were reduced. Local structures were strengthened via

capacity building trainings for case identification, documentation, nutrition program management, public promotion intervention and acute watery diarrhea/AWD.

Following the presentation of stakeholder assessments, the working discussions of this session concentrated on identifying what aspects of the ER had gone very well.



Part 1 - Participants reflected on: what did we do right or well? What worked well? What shows it? Why did it work well? Who benefited? What was our added value in the national emergency responses? What did ChildFund contribute that was unique, special or innovative?

Ethiopia – Operations team

What worked well	What shows it	Why did it work	Who benefited	What was CF's added value to national ER	What did ChildFund contribute that was unique, special & innovative
Timely execution	Need based project design – Lessons document, rapid assessment, proposals	Commitment	Sector Offices & Affected population	Policies developed & revised; systems strengthened	Engagement of elders
Timely & effective financial tracking system	Need based project designing	Coordination			Child friendly space system
Recruitment	Lesson document, rapid assessment	Experience			

Ethiopia Program team

What worked well	What shows it	Why did it work	Who benefited	What was CF's added value to national ER	What did ChildFund contribute that was unique, special & innovative
Timely response (Restored livestock & saved lives)	New/ rehabilitated water schemes	Focused on our operational areas where we have good partnership	Children & PLW	Resources to respond immediately	CPIE as an innovative strategy (Child Friendly Spaces – (CFS))
CP in Emergency (as Key Player)	Trained WASH Committees	Flexibility in meeting donor funding requirement	Market (Suppliers, contractor, etc)	Focus on children	Large scale response with limited staff
Commitment of management worked well	Number/% of children/ beneficiaries reached	Strong leadership	Pastoralist households	Implemented through local partner	Introduced defluoridation of water supply
Coordination of gov't, clusters, other stakeholders	ChildFund visibility	System strengthening	Community	Reaching out to hard-to-reach areas	Maintaining program effectiveness without downsizing existing programs.
Participation of community	New/stronger partnership	Ability to adapt to change in emergency scenario	Gov't staff/ Structure/ System		
Partnership strengthening	Strong fund raising & allocation				

Kenya team (operations & program)

What worked well	What shows it	Why did it work	Who benefited	What was CF'S added value to nation ER
Proposal development team in place	Funds were raised from donors	Communication	ECD Children	Leveraged Gov't efforts
Constant monitoring of situation	Target areas of counties & population	Effective partners	Pregnant & lactating women	Improved & Increased num. of children in ECDs
Well prepared	Past experience	past experience		Contributed to capacity building at county levels
Cooperation among stakeholders	For project outcomes			Targeting pregnant & lactating women
ER Strategy	Fund raising			Mainstreaming Child Protection (CP) in ER

Part 2 – participants reflected on: Which of the issues or examples raised show key qualities of ChildFund’s response, i.e., relevance, timelines, efficiency, effectiveness and sustainability? What shows it? What lessons do we want or need to capture about these successes?



"I enjoyed a lot, especially when it came to the Appreciation Sessions, 'What Did We Do Right and What Worked Well'. Starting with positive lessons motivated and encouraged us to participate more actively and reflect deeply on what we have done. [Wonki - Alliance partner-Korea]"

Ethiopia Operations team

Issue	Relevance	Timely	Efficiency	Effectiveness	Sustainability
Resource mobilization	CO used own resources; built donor confidence	Flexibility in using own resources	Maintained existing development programs	Repeat funds	Donor fatigue (negative)
Development & strengthened partnership	More reach & complementary	Used existing LP structures	Sometimes needed to implement directly by CO	Different competencies/ resource	Continuity of partnership; Diversification
Timely Response	Based on rapid assessment Participatory	Resource & partnership	Delay of food ration could have been less; delay due to security	Reached targets, & objectives	Capacity building Burnout Disaster risk reduction (DRR), e.g., drilling boreholes

Ethiopia program team

Issue	Relevance	Timely	Efficiency	Effectiveness	Sustainability
Policy development & revision	ER		Reduce the cost of requirement	Improved the process	Guiding document for future use
Financial tracking & internal control system	Useful for sound	Timely sharing to	Budget utilization within stated timeline	Prevented misappropriations of resources	System software

	management decision	relevant users			
Child Friendly Space	High level of children participation	Established as per the plan	Address target with minimum resource (HR, funds)	Reduced school absenteeism, Improved school attendance	Integrated with development programs
System strengthening (Case management)	Prevention & response violence			System in place to track data	Guiding document
Best practice documentation	Learning sharing	Match with project end period	Produce with less resources	Enhance feasibility	Used as future reference document

Kenya team (program and operations)

Issue	Relevance	Timely	Efficiency	Effectiveness	Sustainability
ER strategy	Outcomes, Implementation & use of funds	Developed in 20 days after state of emergency was declared		Guide on what & where	Use as point reference in the future
Mainstreaming CP	Aligns with D2020 objective	Conducted during distribution			CP Emergency teams trained
ECD approach	Targeted gap left within the National ER	Done during ECD session & cont'd after school closed	Cost effective in terms of time & money	Reached more children than original targeted	Caregivers expected to carry on

2. Major discussion sessions of day 2:

2.1 Lesson learned II – what did not work well in the ER

This session focused on what had not gone well for Ethiopia and Kenya in their ER responses. Participants were reminded to be candid and learn from mistakes; they were also reminded to refer back to the event timeline.

Ethiopia’s stakeholder assessment - what had not gone well with the ER:

The ER team was unable to reach all of the target beneficiaries with general food rations due to scarcity of resources/high demand. Services were delayed due to lengthy procurement process, market inflation, government delay in signing project agreement and political instability. The ER team had to rely on government data, but it was not adequately verified to ensure credibility.

Kenya’s stakeholder assessment - what had not gone well with the ER:

The Kenya team were also troubled by delays in service provision. The expectations from the gov’t and beneficiaries was huge (food, services, restocking, whole communities, etc.); but our program was focusing on ECD/ caregivers. The affected communities needed food distribution and the team was queried about why elders and other vulnerable groups were not also being targeted.

The small group working exercises were based on discussions about: what could be done differently next time. What did we not do right/well; What did not work well? What shows it? Why did it not work well? What if any, were some of unintended outcomes (consequences) as a result and who was affected? After a first block of working time on these issues, the exercise continued by asking participants to discuss the following points:

- Resource mobilization and management: staff and care, fundraising and management
- Organization function: policies and procedures, tools/guideline

- Leadership: plan, coordination
- Accountability: reflection and learning, M&E, (intended and unintended outcomes), communication

The following tables shows the summary presentations of all the working groups.

Kenya CO team

Did not work well	What shows it?	Why not?	Unintended outcomes	Who affected
Procurement process	Designed for centralized procurement at CO level, but had delayed procurement	Inadequate of list of pre-qualified suppliers able to respond for ER	Decentralized procurement - NERT let LPs in affected areas identify possible suppliers, get quotes, & submit to CO for approval	Targeted beneficiaries (Children & PLW)
Expected role of Local Partners (LPs)	Delayed implementation & reporting	only 1 LP in affected area; LP was overwhelmed by expected roles from ChildFund, WFP & Government of Kenya	Reassignment of staff	ChildFund/LP staff
Older children excluded	ER strategy	Targeted ECD children	Some communities allowed older children into feeding program	Older children in community
Limited # of PLW reached	Conflict during distribution	ER funding gap	Frustrating/Conflict in community	PLW
Price fluctuation	Delayed supplies	Budget not adjusted for change in prices; Some suppliers turned down LPs after long time	Lesser quantities of good quality able to be purchased	Target beneficiaries

Ethiopia program team

Did not work well	What shows it?	Why not?	Unintended outcomes	Who affected
Lack of/user reliable data	Frequent revision	Not double checking/ triangulation	Delay	Community & image
Coordination	Tension	Lack of ER system	Frustration	Staff
Procurement	Delay & poor quality	Procedure & attitude	Cost extension	Community & image
Staff turnover	High turnover	Compensation package & short life span	Delay & quality project implementation	Community & image
Approval limit	Delay in approval	ER approval matrix	Burnout	CO
Integrate CP in all sectors	Stand-alone project	Resource (Finance & HR	Unmet need	Children
Networking with stakeholders	Inadequate support	Lack of experience	Lengthy process	Implementation
KM system not adequate to retrieve lessons from current & past ER projects	Inaccessible data/ information to enrich concept notes & proposals	M&E system lacked a central repository; info had to be gathered piecemeal; unable to portray overall ER achievements/challenges	Delays in preparing good concepts & proposals	Fundraising & proposal writing staff

Ethiopia operations team

Did not work well	What shows it?	Why not?	Unintended outcomes	Who affected
Reliance on Gov't data/Information	Delay in project completion	Inaccurate data/information	Budget variation	ChildFund & Beneficiaries
Sustainability, e.g., for CPIE	Discontinuation of CFS	As stand-alone project, Inadequate investigation	Motivated early learning	Children & caregiver
Timely procurement	Inadequate policies & procedure	Specification problem, delay in reviewing process	No-Cost-Extensions (NCEs)	Beneficiaries & Donors

Signing of project agreements	Late approval, Inadequate planning	Late submission of proposal, delay of donor approval, lengthy appraisal by gov't		
Mgmt. of construction contracts	Quality of work & request variation (# of complaints)	Procedures Monitoring	Implementation delays; unintended cost/ expense	Community
Staffing & care	High turnover	Comp benefits package	Staff burnout	Delay implementation & closure

RO/IO team

Did not work well	What shows it?	Why not?	Unintended outcomes	Who affected
Mobilizing or activating RO/IO response	Minimal RO contribution & IO response delayed by several months	Unclear RO/IO response protocol & Regional Emergency Response Team (RERT) not activated	COs overly challenged in trying to respond rapidly	COs & Stakeholders
Concise communication (Branded)	Delayed/less effective fund raising Slow procurement Insufficient gov't funding	Communication not shared with all departments Capacity & knowledge Substandard procurement	Unnecessary grant extension	
Mobilising suitable funding/grants from Alliance partners	Challenges with specific donor gov't funding requirements Underspending, reporting issues and implementation delays	Alliance grants can require a lot of overhead effort/costs to meet grant requirements Insufficient allocation within grants for start-up, management, staffing & other operational costs	Misunderstandings & frustration between COs & donors over management costs	

In the next part of the session, participants reflected on extracting meaningful lessons from failures. The guiding questions for this part of the exercise were: What lessons do we want/ need to capture about these “Negatives” for sharing and effective use in the future? (reminder, we are after “Real” lessons, per our agreed definition for the concept)

Kenya CO team

Experience (failure)	Lessons learned from failures	Recommendation	Implications
Implementation was delayed/constrained by lack of suppliers prequalified for ER support	COs need access to suppliers that are prequalified for ER support.	Establish separate pre-qualified database of suppliers for ER	<ul style="list-style-type: none"> Up to date database-update protocols Technical capacity to oversight Credible selection process and criteria

Other recommendations from the team:

- Regular CO NERT reflections to fast-track ER decision making

Ethiopia program team

Experience (failure)	Lessons learned from failures	Recommendation
Inadequate procurement process led us to delayed execution	Implementing stand-alone ER adversely affected sustainability of ER Projects	Integrate ER with other dev't programs; Reduce or avoid stand-alone ER projects

Other recommendations from the team:

- Strengthen technical aspects of capacity
- Outsource some of the works

Ethiopia operations team

Experience (failure)	Lessons learned from failures	Recommendation
Unattractive staff benefits/ compensations packages, led to rapid turnover of ER staff	Need to revisit packages	ER project staff management <ul style="list-style-type: none"> Comp. packages Roster Better Support Innovative for retention

Other recommendations from the team:

- Develop ER specific (time sensitive) procurement system
- Importance of integrating CP in ER
- Integrate DRR in regular program

RO/IO team

Experience (failure)	Lessons learned from failures	Recommendation
Response protocol from IO/RO not functioning in practice	Chain of communication not working internally in ChildFund	<ul style="list-style-type: none"> • Internal cross-departmental meeting in IO post-AAR to review & suggest specific actions; also experiment with enhanced virtual communication. • Ensure that GERT & RERT (Global & Regional Emergency Response Teams) are activated immediately upon decision to declare a medium or large-scale emergency response; & that they carefully assess & address affected CO's support needs.
Grant management support was limited from IO	IO does not have capacity to backstop post-awards management of non-USG grants below a certain threshold	Create additional IO post-awards management capacity, within either EMU or GAM team, specifically for situations where a CO is handling multiple, medium-sized emergency grants.

"I am broken and rebuilt. I thought I knew everything, but you have shown me how lessons can be learnt from previous mistakes and from others to make better future decisions. We don't know everything, and it's good to be open to new ideas from others." [Zack -Kenya]

"It was very relieving to talk about previous failures without being defensive. It is important to discuss failures and learn from them and be open when receiving constructive criticism so that better decisions can be made." [Fasil - Ethiopia]

2.2 Developing and prioritizing recommendations

In this session, participants reflected on the following tasks:

- Prioritize lessons learned - Review from today's and yesterday's work; identify at least one good response to promote & at least two weak responses to strengthen or improve;
- Each group was allocated 2 issues: a) leadership & b) organizational structures; c) resource mobilization & maintenance, & d) accountability; e) sustainability & f) advocacy.
- Building recommendations - Where do we go from here? What is a good recommendation to improve our practice for each of the lessons.
- Consider issues by level: IO-RO-CO-LPs; Consider qualities of good recommendation; If possible, consider implications (what support or prerequisites needed to implement the recommendation)



Results:

Description	Recommendation
Leadership	<ul style="list-style-type: none"> • The Country Director to ensure that an informed & functional NERT will follow up on action & strategies through regularly scheduled meetings • CD to ensure effective, efficient & up to date ER policies & procedures are in place & aligned with the country context.

	<ul style="list-style-type: none"> • CD informs fund raising/grants team of ER staffing requirements to ensure they are included in ER budget proposal funding. • HR director to ensure & implement a robust system to attract & retain ER staff, as needed
Organizational structure	<ul style="list-style-type: none"> • CO program unit to be accountable to ensure integration of CP, DRR aspects at the proposal development stage. • CO to assign relevant functional unit to confirm data provided about/from stakeholders • NERT to finalize update EPP is completed per EPP Guideline & submitted to RO for approval
Resource mobilization & maintenance	<ul style="list-style-type: none"> • CO to establish & regularly update pre-approved vendor data base (based on criteria, EMU Guideline & in-country experience). CO to establish consolidated procurement plan. Pre-requisite: IO & RO support on approval; • Build on partnership strategy - Build strategic partnerships with organizations of experts, including INGOs to utilize /capitalize on their contractors or partners • Review ER Grants for appropriateness & capacity while addressing necessary costs (CAF, subsidy, etc.) with final approval at CO level. Good practice - CO to work with proposal development. Clear understanding of appropriateness by CO
Accountability	<p>Improve communications:</p> <ul style="list-style-type: none"> • When an Emergency is declared, EMU will reorient all ROs, COs & divisions within IO of any current emergency PNP. EMU could use emails that include a link to documents on SharePoint for more details • When an emergency is declared, the affected CO could participate in regular online meetings (possibly webinars?) open to all levels (IO, RO, RO & etc.) to provide updates on current status, challenges & needs. Meetings could be organized by EMU, & share feedback across all levels. • Build on system of knowledge management already in place in Ethiopia; ensure it is replicated to other ERs & agree with EMU on location of where the system is documented & how it is shared. • IO should engage with & learn from key alliance partners & how they mobilize resources & how they streamline communication with COs. • Build an existing feedback mechanism at CO with project participations & revisit where improvements are needed participant feedback for CO decision making processes. • Regular NERT agenda to include review of any emergency evidence/outcome from members & stakeholders.
Sustainability	<ul style="list-style-type: none"> • COs should build on existing practices & community established structures to improve project design and incorporate the "build back better" concept. • More partnership & enhance resilience
Advocacy	<ul style="list-style-type: none"> • CO to ensure budget for advocacy is included in ER strategy from the start to influence policies and change around ER.

Additions in summary discussion

- Enhance resilience concepts on all levels and communities.
- Develop partnership with other NGOs with common agenda.



- Empower partners to represent ChildFund in some international meetings if not able to attend.

"We can be more successful by formalizing plans: Budgeting (Flexibility

-Contingency); Funding; Staffing (Capacity issues, Roster ER, Deployment); Policies; Procedures; Roadmap from previous learned capacity building plans." [Brenda -IO- USA]

"As an alliance partner, we get few chances such as this one to really know about projects. Reading documents such as a monitoring report and final reports is boring because it does not include what you are proud of and what can be done to improve the weak areas." [Wonki - Alliance partner-Korea]

3. Major discussion sessions on day 3:

3.1 Long-range thinking:

Participants engaged in four working groups with pairs of major issues:

EPPs	Partnerships	HoA regional outlook	Building resilience & DRR
Pre-positioning	Coordinating bodies	Policy advocacy	Transition to recovery

Each table group worked on the following challenges with their issues:

- *Reflect on current strengths and weaknesses of ChildFund as an organization in these two areas*
- *Consider all levels of the organization (Alliance, IO, RO, CO, LPs)*
- *Identify an emerging lesson (+/-) to be addressed for effective long range thinking on each topic*
- *Generate at least one good recommendation per topic for ChildFund for each topic*

Themes: EPPs, pre-positioning

<p>Lessons</p> <ul style="list-style-type: none"> • EPPs for vulnerable countries are critical; COs without a finalized EPP in place had a delayed ER, • A CO without an EPP will not have a programmatic focus & hence be prone to reactive or donor interests. • An EPP supports pre-positioning effects: grants, staffing, fundraising, policies, early warning systems
<p>Recommendations</p> <ul style="list-style-type: none"> • Completed EPPs should be "Good enough", & not necessarily perfect or 'finalised' • The CD in each CO should ensure that the CO has a completed EPP in place • The CD should include the EPP in the CSP so it will be reviewed & updated regularly. • CSP guideline should include a section on EPP. • The EPP development process should be inclusive & participatory • Oversight/support from RD/DRD & EMU to ensure good EPP planning.

Themes: Partnership, coordinating bodies

Partnership	Coordination
<p>Strengths</p> <ul style="list-style-type: none"> • Working with LPs has good potential to contribute to strong EWS in an ER; Having strong partners on the ground enables us to reach communities faster & collect situational information faster. • Strong partners in vulnerable areas includes knowledge & capacity • Representation & membership in clusters & INGOs (WASH, CP, health, education, livelihoods); strategic presence in clusters & INGOs enables us to get national & regional level information, & positions us early on for our response decisions. <p>Weakness</p> <ul style="list-style-type: none"> • Not enough staff time/positions to cover all key clusters & TWGs • Cluster system exists with different forms & different levels in different countries • No systematic approaches for responding in a non-presence area. • Weak competency of some LPs in responding to emergencies 	<p>Strengths</p> <ul style="list-style-type: none"> • Good relationship & recognition of ChildFund by national level coordination bodies. • Existing policies & procedures (ChildFund) guide our ER work & help contribute to coordination bodies (choice partners) • Inadequate partnership in national & regional coordination bodies - networking & strategic engagement facilitated our effective in ER
<p>Recommendation</p> <ul style="list-style-type: none"> • COs to strengthen strategic partnerships with key stakeholders in our ER gap areas. • CO EPP to be built with participation of LPs • COs to strengthen knowledge & capacity of LPs in ER 	<p>Recommendation</p> <ul style="list-style-type: none"> • COs to be strategic in partnership & engagement with coordination bodies. • RO to understand regional ER networks & be selective • Link with internal communication system • Include similar at other levels

Themes: HOA regional outlook, policy advocacy

HOA regional Outlook	Policy Advocacy
<p>Strengths</p> <ul style="list-style-type: none"> • Significant presence 	<p>Strengths</p> <ul style="list-style-type: none"> • Increased focus on advocacy

<ul style="list-style-type: none"> Consolidated appeal for HOA crisis Fund raising credibility <p>Weaknesses</p> <ul style="list-style-type: none"> Networking with our organization Missing visibility, that affects fund raising Late response 	<ul style="list-style-type: none"> In Kenya, there is strong policy advocacy at country level Participate at AU forum, delegated by RO <p>Weaknesses</p> <ul style="list-style-type: none"> No significant effort for ER focused advocacy We don't have dedicated budget or resource Documentation of our work & experience has limited sharing across the organization & beyond
<p>Lessons</p> <ul style="list-style-type: none"> Poor visibility because of limited resource, knowledge & skills that support our advocacy effort & weak linkage across the organization Need good knowledge management for evidence to support advocacy To remember that advocacy is different from confrontation 	
<p>Recommendation</p> <ul style="list-style-type: none"> Ensure IO, RO, CO & LPs members have resource & skills for increased policy advocacy for timely & effective ER ER strategy at CO level should always include budget for advocacy purposes. Improve coordination link between levels for effective advocacy 	

Themes: Building resilience & DRR, transition to recovery

<p>Building resilience DRR</p> <ul style="list-style-type: none"> DRR is not prioritized during the planning, due to budget constraint of relying on subsidy New funding model allows for testing DRR approaches strategically 	<p>Transition to recovery</p> <ul style="list-style-type: none"> Water management committee at the community level ensures sustainability of the water schemes. There are inconsistencies in transitioning from emergency to recovery - timing, reporting, level of engagement & budget. Integrating ER with other programs e.g.: refresh training for WASH committees in annual operational planning & budgeting.
<p>Recommendations</p> <ul style="list-style-type: none"> Build Resilience DRR Transition from pastoral to agro-pastoralism Include attention to critical livelihood issues in EPP & ER strategy- in protocol/ checklist & early warning CBCPM to ensure resilience Promote saving & loan schemes to implement income generating activities & natural resource management Allocate a budget for DRR/ Resilience building by CO, IO, Alliance 	<p>Recommendations</p> <ul style="list-style-type: none"> CO to include clear recovery transition plan in the strategy & budget at the onset of the emergency response program WASH committees should be functioning & knowledgeable IO to develop "good enough" guide to CO ER strategy

"ER is complex and dynamic thus to realize outcomes and impacts it needs to be managed within the cultural / geographical context due to differences from place to place." [Zack -Kenya]

3.2 Action plans

Action plans were formulated by CO teams, and the team of participants visiting from RO, IO (F&E), Alliance, and IO (EMU).



Ethiopia CO team

What should we do	By when	By whom	Needed to do it	How to verify achievement
Develop Competitive comp.+ benefit packages (including staff care)	End of June, 2018	HRAD	SMT support & RO	Procedure approved
TORs - When EMG-ER & when no EM-Resilience	December 2019	HRAD	SMT support & RO	Approved structure
Develop PQVL for ER/Roster	March 2019	PC	HRAD & PD	Approved PQVL

Establish clear lines of accountability to enhance integration & coordination	End of June, 2018	CD	SMT support	Guideline Approved (include process & timing of acct.)
Develop Emergency Communication protocols	End of June, 2018	CS	RO & EMU	Protocol approved
Revise current ER strategy	Q1 FY'19	CD	Vulnerability assessment, staff time, budget, LPs participation, cross-department coordination	Approved EPP; Assessment report Emergency strategy
DRR integration	FY'19	PD	DRR focus in program strategy; analysis (disaster priority); FY'19 AOPB; capacity building for LPs; children participation; CO, LPs commitment	Budget/PEF/NFM allocation to DRR Disaster Analysis DRR plan in AOP of LPs
Partnership strengthening	FY'19	CD	Internalize partnership strategy; partners mapping; prioritization; budget/ staff	Strategy in partnership & leverage
Resource mobilization	Beginning of FY'19	PD	Humanitarian donor mapping; CAP-emergency; Contingency budget-NERT	Mapping; CAP statement National Emergency Fund Approval
Advocacy	Beginning of FY'19	CD	Adapt advocacy protocol for emergency; GAP analysis; Stakeholders analysis	Advocacy plan; Participation in regional/ National forums

Kenya CO team



What should we do	By when	By whom	Needed to do it	How to verify achievement
'Completion' of EPP (as a 'living document')	By end of March'18	CD	Draft EPP, logistic support during meeting & working; Committed & dedicated work; Include LP participation	Approved EPP by DRD; LPs have copies & aware of content & roles
Establish updated pre-approved vendor list for ER supplies/support	By 30 th June'18	HRAD	Funds; Adverts; Tender committee commitment	Approved ER vendor list by CD; Tender committee minutes
Activate NERT (CERT); roster for NERT	Onset of emergency	CD	Commitment from NERT, procurement plan & Budget allocation	NERT Meeting minutes/ reports
NERT TORs to extend into recovery phase	By 30 th of June	PD	Logistic support; Buy-in by LPs; Funds	Approved LP AOPBs with DRR

RO, IO (F&E), Alliance, IO (EMU)



What should we do	By when	By whom	Needed to do it	How to verify achievement
Centralized data location that links to all content/reports for everyone to access; searchable	Q1-4, FY19	Content specialist	Maintain it; Staff; IT support; Commitment; All to have access;	Learning briefs linked to docs in database; webinars linked to database. Less duplicate content; ensure all have info as & when needed
Establish/refine guidelines	Q1, FY19	EMU	Commitment	Functional EPPs meeting 'good enough' criteria
Organize learning events between Asia & Africa NERTs		EMU	IT support; facilitator	Recorded webinars

Global HR-ER team to include HR officer from Ethiopia or Kenya for their long ER experience		GHR, ER, WG, EMU		
Define ER role of RO in region, in consultation with Ethiopia and Kenya and communicate to all CO; Decide on one RERT (reg ER team) in Africa, & membership. RO to also engage with advocacy team at IO	June 2018	2 DRDs	CD commitment; Inputs from EMU & Asia DRD	RERT (reg ER team); ToR + RACI of its members; Increased engagement in CO ERs
Review of ER-PNPs with CO & RO	As emergency is declared	EMU	EMU reviews ER-PNP with CO & RO when emer. is declared	RERT's documentation, PNP of issues addressed for particular emergency; recorded webinars
RO to decide which regional network/s to sit in on & who to do it	Q1, FY19	Davidson	EMU & CO input	COs report understanding of regional ER trends

3.3 Closing remarks

The facilitator brought all participants into a circle, holding hands, for sharing any brief comments that each person would like to make to the rest of the group before the meeting officially closed. The most common comments around the group were that this was a real learning experience; the learning and wisdom came from each other; the workshop has changed how we look at failures – we now see them as more of an opportunity for learning; and the timeline is a powerful tool for reflection.

"We can learn to share supportive information across the globe with each other to strengthen ER and to be on one page as ChildFund Organization." [Fasil -Ethiopia]



"Ethiopian emergency response long history & different experience even by month. The process matters mean knowing the context → event identification → appreciate what we have → what contribute for success → identify the failures → lesson learned → recommendations from the final action plan. We can adopt this flow for other activities. Thanks a lot." [from final evaluation]

"I will use the information & lessons learned here to communicate our work to donors & sponsors, as well as other CF staff who are unaware of ER work. This was a huge eye-opening & enlightening exercise & opportunity." [from final evaluation]

"Ethiopia, Kenya, RO, IO & Alliance staff came together for 2.5 days to deliberate the accomplishments in responding to a long drawn-out & complex ER in Ethiopia & Kenya - with drought & floods. Everyone was deeply committed to identify strengths & bottlenecks with a strong commitment to improve & contribute to future ER practices. A number of bottlenecks identified had already been identified & addressed. EMU needs to ensure those good practices are shared widely. What has also been great is that resilience building & DRR strongly emerged as priorities for our 'regular' programme work. We came away with solutions & actions to follow up on short & long term." [from final evaluation]

Annexes

A1. Participants:

IO: Benjamin Phillips, Brenda Lachance, Morgan Bailey, Hannah Davis

RO: Anita Anastacio, Janet Gichamba; Tenagne Mekonnen; Francis Lwanda;

ChildFund Kenya: Daniel Kinoti; Sarah Ndegwa; Zack Lenawamuro; Peter Lochuch; Esther Ndungu

Ethiopia CO: Jarsso Wakeyo; Wossen Yimer; Tigist Tarekegn; Haimanot Yemane; Alemtsehay Zergaw; Ruth Kerubo; Befekadu Bezabih; Chege Ngugi; Fasil Damte; Sisay Bekele; Martha Alemayehu; Alemtsehay Zergaw; Yabetse Assefa; Zewdie Zergaw; Habtamu Abetew; Gezahegn Shewangizaw, Wendimu Tesfaye,

ChildFund Korea: Wonki Oh; Juwon Hwang

Facilitator: Tom Barton

Note takers: Ruth Kerubo and Gezahegn Shewangizaw (ChildFund Ethiopia)

A2. Agenda [short form]

Session title & objective
Wednesday, 21 Feb -- Plans, Reality, & What went well
Overview of the AAR Workshop Objective – establish base for workshop
Disaster timeline – events & responses Objective – understand context, major events, timing of major interventions
Plans vs reality Objective – examine planning processes [before & during disaster]; examine coping strategies for evolving aspects of the disaster
Lessons Learned Part 1: Things we did right Objective – appreciative inquiry about ChildFund’s role, performance, & added value in the emergency response; single loop learning – what things did we do right? Relates to W/S Obj 1 & 2
Daily wrap-up, mini-evaluation & announcements
Thursday, 22 Feb -- Meeting the challenges & ways to improve
Day 1 Highlights & Day 2 overview Objective – connecting the dots, & connecting with the workshop objectives
Lessons Learned Part II: Things we’d do differently next time around. Objective – critical reflection (but not blaming/shaming); double loop learning – did we do the right things? Relates to W/S Obj 1
Lessons Learned Part II: Cont’d
Drafting key recommendations – focus on emergency response Objective – develop specific, actionable recommendations, including who to be responsible. Relates to W/S Obj 3
Drafting key recommendations: Cont’d
Daily wrap-up, mini-evaluation & announcements
Friday, 23 Feb -- Looking to the future
Day 2 Highlights & Day 3 Overview
Long range planning/preparation for future disasters & disaster prevention/mitigation ahead of time Objective – preparatory thinking/planning beyond the current disaster. Relates to W/S Obj 3 & 4
Action planning for post-AAR; how to wrap up/close the ER Objective – develop action plan, with prioritized key actions, time line – roles for COs, RO & IO? Relates to W/S Obj 3
AOB; Wrap-Up & Closing of the general workshop
Senior management review – where did we land? [participants: senior mgmt. – IO, RO, CDs; + CO emergency leads] Objective: Relates to W/S Obj 3 & 4

A3 – ER timelines – Ethiopia and Kenya

Ethiopia ER timeline - from April 2015- March 2018

Apr-15	May-15	Jun-15	Jul-15	Aug-15	Sep-15	Oct-15	Nov-15	Dec-15	Jan-16	Feb-16	Mar-16
Get approval from IO for fund diversion	Implementation & response continued	Design Workshop with LPs		Gov't declared food shortage an Emergency	Fund raising appeal Operated in new areas	CMAM Phase 1	ChildFund Korea Fund raising	Fund raising from IO	Fund raising from IO 10.2 Million people affected	Hired ER staff	Added funds from Alliance, Finalize strategy & structure with IO; formed NERT No rain, worse drought
Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17
CPIE started CMAM Phase 1 closure Hosted African Leadership Meeting Visit from CF president	Fund from IRC CMAM Phase 2 launched Extended ER outside of CF operation areas	9.7million people need CFK support in Fentale	Rain come-flood Flood response	Direct Food distribution Diversified intervention La nina conditions developed CFK Appeal	CPIE in SNNP, Delay Agreement Gov't accepted CP (lifesaving) Flood response in Boset suspended SR activities National State of Emergency; Staff evacuation & stop operation	Political instability State of Emergency CMAM Staff high turnover	travel restriction CFK support in Boset	CMAM Phase 2 closure 5.6million ppl need Design resilient	Food distribution Educational Materials distribution Land slide response CPIE closure Oromia Gov't terminal Evaluation	Closure of IRC Closure of UNOCHA Gov't terminal Evaluation CPIE terminal Evaluation	Fund raising Appeal
Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18
Emergency seed provision Fund raising Appeal CFK Support in Siraro	CMAM 3 Launched Fund raising Appeal Staff turnover	Lesson learnt documentation Fund raising Appeal CPIE SNNP- Closure Gov't terminal Evaluation	Midterm review of HRD IO Fund raising CPIE end line Evaluation by Consultant	Rapid Assessment for WASH/IRC ChildFund nominated as an Ambassador (World Hum. Day)	Relief & Supplementary food distribution Gov't call for IDP response Flood response Fentale	Secured Fund from IRC/ECHO ER staff recruitment CMAM 4 started Staff turnover	Closure of CMAM 3 Food Distribution Fentale, Boset & Merti	IRC ER project launched Staff turnover Water supply response in Balaya	IDP response Food Distribution in Siraro Participate on Regional plan-Oromia Fire incident in one of CF operation area ER specialist recruited	AAR Workshop Hotspot classification Resignation of Ethiopia PM State of Emergency Security Incidents Stop movement of stakeholders analysis AAR ChildFund staff meeting	WASH intervention by IRC Terminal Evaluation to be conducted for Siraro Response

Kenya ER timeline - from Feb-17 to Jan-18

Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18
Received Sitrep from LPs indicating worsening drought situation Gov't declared food shortage an Emergency SMT approved Fund diversion for ER	CO with IO support, develop Food Crisis Emergency Strategy CO started developing several Emergency grant proposals Fund raising appeal	CO started receiving fund from IO NSP Floods Implementation of diverted Fund	Fund raising efforts continued CO emergency response team/ Davidson Jonah did a reconnaissance of affected/ target areas Received Fund from France	Nurse's strike Recruitment of ER Coordinator Reconstitution of Field implementation team Funds received from Sweden, New Zealand, Australia	Startup workshop for all grant projects End of funding mobilization Full implementation	Election Implementation & responding disrupted Received Fund from Germany Implementation & Response continued	Anne visit Implementation & response continued	Repeat election Slowed the implementation & response Schools closed for holiday	Flood disaster in Turkana Massive livestock death as a result of flood NERT Review Meeting Implementation & response continued	Implementation & response continued Request for no-cost extension Additional Fund from France Funding from IO- NSP	Implementation & response continued